

Correction: *Efficacy and safety of ixekizumab through 52 weeks in two phase 3, randomised, controlled clinical trials in patients with active radiographic axial spondyloarthritis (COAST-V and COAST-W)*

Dougados M, Wei JC-C, Landewé R, et al. Efficacy and safety of ixekizumab through 52 weeks in two phase 3, randomised, controlled clinical trials in patients with active radiographic axial spondyloarthritis (COAST-V and COAST-W). *Ann of Rheum Dis* 2020;79:176-85.

The numbers in table 1 and supplementary Table 3 were inadvertently sourced from outdated documents. The correct details are shown as:

Table 1 Week 16* and 52 efficacy endpoints for patients treated continuously with ixekizumab: COAST-V and COAST-W (ITT population: NRI, modified baseline observation carried forward)

	COAST-V (bDMARD-naïve)				COAST-W (TNFi-experienced)			
	Ixe q4w (n=81)	Ixe q2w (n=83)	Ixe q4w (n=81)	Ixe q2w (n=83)	Ixe q4w (n=114)	Ixe q2w (n=98)	Ixe q4w (n=114)	Ixe q2w (n=98)
Patients achieving response, n (%)								
NRI	Week 16	Week 52	Week 16	Week 52	Week 16	Week 52	Week 16	Week 52
ASAS40	39 (48.1)	43 (53.1)	43 (51.8)	42 (50.6)	29 (25.4)	39 (34.2)	30 (30.6)	30 (30.6)
ASAS20	52 (64.2)	53 (65.4)	57 (68.7)	59 (71.1)	55 (48.2)	60 (52.6)	46 (46.9)	47 (48.0)
ASAS partial remission	12 (14.8)	22 (27.2)	12 (14.5)	20 (24.1)	7 (6.1)	13 (11.4)	5 (5.1)	8 (8.2)
ASDAS clinically important improvement	50 (61.7)	51 (63.0)	50 (60.2)	51 (61.4)	51 (44.7)	53 (46.5)	48 (49.0)	44 (44.9)
ASDAS major improvement	24 (29.6)	30 (37.0)	19 (22.9)	29 (34.9)	18 (15.8)	27 (23.7)	21 (21.4)	26 (26.5)
ASDAS<2.1 (low disease activity)	35 (43.2)	43 (53.1)	35 (42.2)	43 (51.8)	20 (17.5)	27 (23.7)	16 (16.3)	24 (24.5)
ASDAS<1.3 (inactive disease)	13 (16.0)	18 (22.2)	9 (10.8)	16 (19.3)	4 (3.5)	10 (8.8)	5 (5.1)	4 (4.1)
BASDAI50	34 (42.0)	43 (53.1)	36 (43.4)	38 (45.8)	25 (21.9)	31 (27.2)	23 (23.5)	27 (27.6)
Mean change from baseline (SD)								
mBOCF†	Week 16	Week 52	Week 16	Week 52	Week 16	Week 52	Week 16	Week 52
ASDAS	-1.4 (1.2)	-1.7 (1.2)	-1.4 (1.0)	-1.6 (1.0)	-1.1 (1.0)	-1.2 (1.1)	-1.2 (1.1)	-1.3 (1.2)
BASDAI	-3.0 (2.4)	-3.3 (2.5)	-2.7 (2.1)	-3.1 (2.3)	-2.1 (2.0)	-2.4 (2.4)	-2.1 (2.3)	-2.4 (2.3)
BASFI	-2.4 (2.3)	-2.8 (2.5)	-2.5 (2.2)	-2.8 (2.4)	-1.6 (2.1)	-2.1 (2.5)	-1.9 (2.3)	-2.1 (2.3)
SF-36 PCS‡	7.1 (7.9)	8.3 (9.5)	7.4 (6.6)	8.1 (7.5)	6.3 (7.5)	6.5 (8.5)	6.0 (7.7)	7.1 (7.6)
ASAS Health Index	-2.3 (3.3)	-2.7 (3.3)	-2.8 (3.2)	-3.3 (3.6)	-2.0 (3.1)	-2.3 (3.7)	-1.8 (3.9)	-2.5 (3.5)
SPARCC MRI spine score§	-8.9 (16.2)	-8.8 (17.3)	-8.7 (16.5)	-8.5 (15.9)	-3.2 (8.3)	NA	-5.1 (11.9)	NA
SPARCC MRI sacroiliac joint score¶	-3.4 (7.6)	-3.3 (8.7)	-4.1 (7.3)	-4.2 (7.5)	NA	NA	NA	NA
CRP, mg/L	-6.8 (16.7)	-9.2 (12.4)	-8.4 (15.7)	-9.6 (14.5)	-11.5 (30.1)	-10.3 (31.1)	-10.3 (19.4)	-9.8 (19.2)

	COAST-V (bDMARD-naïve)		COAST-W (TNFi-experienced)	
	Ixe q4w (n=81)	Ixe q2w (n=83)	Ixe q4w (n=114)	Ixe q2w (n=98)

*Except for ASAS partial remission (both studies), ASDAS clinically important improvement (both studies), ASDAS major improvement (both studies), ASDAS <1.3 (COAST-W) and BASDAI50 (COAST-W), all Week 16 data have been previously reported.^{10,11}

†For patients who discontinued study drug because of an adverse event, the baseline observation was carried forward to the corresponding time point for evaluation. For patients discontinuing study drug for any other reason, the last non-missing observation before discontinuation was carried forward to the corresponding time point for evaluation.

‡SF-36 PCS data are reported as t-scores, based on 2009 US general population norms.

§Observed data only (not assessed after Week 16 in COAST-W). COAST-V: Week 16, n=78 (IXE Q4W) and n=74 (IXE Q2W); Week 52, n=72 (IXE Q4W) and n=68 (IXE Q2W). COAST-W: Week 16, n=49 (IXE Q4W) and n=45 (IXE Q2W).

¶Observed data only (not assessed in COAST-W). COAST-V: Week 16, n=78 (IXE Q4W) and n=75 (IXE Q2W); Week 52, n=72 (IXE Q4W) and n=69 (IXE Q2W).

ASAS, Assessment of SpondyloArthritis international Society; ASDAS, Ankylosing Spondylitis Disease Activity Score; BASFI, Bath Ankylosing Spondylitis Functional Index; BASDAI, Bath Ankylosing Spondylitis Disease Activity Index; bDMARD, biological disease-modifying antirheumatic drug; CRP, C-reactive protein; ITT, intent-to-treat; IXE Q4W, ixekizumab 80 mg every 4 weeks; IXE Q2W, ixekizumab 80 mg every 2 weeks; mBOCF, modified baseline observation carried forward; MRI, magnetic resonance imaging; NA, not applicable; NRI, non-responder imputation; SD, standard deviation; SF-36 PCS, Medical Outcomes Study 36-item Short-Form Health Survey Physical Component Score; SPARCC, Spondyloarthritis Research Consortium of Canada; TNFi, tumour necrosis factor inhibitor.

Table 3 Week 16 and 52 efficacy endpoints for patients treated continuously with ixekizumab: COAST-V and COAST-W (ITT population: observed data)

	COAST-V (bDMARD-naïve)				COAST-W (TNFi-experienced)			
	Ixe q4w (N=81)	Ixe q2w (N=83)	Ixe q4w (N=114)	Ixe q2w (N=98)	Ixe q4w (N=114)	Ixe q2w (N=98)	Ixe q4w (N=114)	Ixe q2w (N=98)
Patients achieving response, n (%)	Week 16	Week 52	Week 16	Week 52	Week 16	Week 52	Week 16	Week 52
ASAS40	39/78 (50.0)	43/72 (59.7)	43/81 (53.1)	42/74 (56.8)	29/100 (29.0)	39/88 (44.3)	30/91 (33.0)	30/80 (37.5)
ASAS20	52/78 (66.7)	53/72 (73.6)	57/81 (70.4)	59/74 (79.7)	55/100 (55.0)	60/88 (68.2)	46/91 (50.5)	47/80 (58.8)
ASAS partial remission	12/78 (15.4)	22/72 (30.6)	12/81 (14.8)	20/74 (27.0)	7/100 (7.0)	13/88 (14.8)	5/91 (5.5)	8/80 (10.0)
ASDAS clinically important improvement	50/78 (64.1)	51/72 (70.8)	50/80 (62.5)	51/74 (68.9)	51/100 (51.0)	53/85 (62.4)	48/91 (52.7)	44/78 (56.4)
ASDAS major improvement	24/78 (30.8)	30/72 (41.7)	19/80 (23.8)	29/74 (39.2)	18/100 (18.0)	27/85 (31.8)	21/91 (23.1)	26/78 (33.3)
ASDAS <2.1 (low disease activity)	35/78 (44.9)	43/72 (59.7)	35/80 (43.8)	43/74 (58.1)	20/100 (20.0)	27/85 (31.8)	16/91 (17.6)	24/78 (30.8)
ASDAS <1.3 (inactive disease)	13/78 (16.7)	18/72 (25.0)	9/80 (11.3)	16/74 (21.6)	4/100 (4.0)	10/85 (11.8)	5/91 (5.5)	4/78 (5.1)
BASDAI50	34/78 (43.6)	43/72 (59.7)	36/81 (44.4)	38/74 (51.4)	25/100 (25.0)	31/88 (35.2)	23/91 (25.3)	27/80 (33.8)
Mean change from baseline (SD)	Week 16	Week 52	Week 16	Week 52	Week 16	Week 52	Week 16	Week 52
ASDAS	-1.5 (1.1)	-1.8 (1.1)	-1.4 (0.9)	-1.7 (1.0)	-1.2 (1.0)	-1.4 (1.1)	-1.2 (1.1)	-1.5 (1.2)
BASDAI	-3.1 (2.4)	-3.6 (2.3)	-2.7 (2.0)	-3.3 (2.3)	-2.3 (2.0)	-2.9 (2.3)	-2.1 (2.4)	-2.8 (2.3)
BASFI	-2.5 (2.3)	-3.1 (2.3)	-2.5 (2.2)	-3.1 (2.4)	-1.8 (2.0)	-2.6 (2.5)	-2.1 (2.3)	-2.5 (2.3)
SF-36 PCS*	7.5 (7.7)	9.4 (9.0)	7.5 (6.6)	9.0 (7.3)	6.8 (7.4)	8.0 (8.7)	6.3 (7.7)	8.2 (7.8)
ASAS Health Index	-2.3 (3.3)	-3.0 (3.2)	-2.9 (3.2)	-3.7 (3.5)	-2.2 (3.1)	-3.0 (3.8)	-1.9 (4.0)	-2.9 (3.7)
SPARCC MRI spine score	-8.9 (16.2)	-8.8 (17.3)	-8.7 (16.5)	-8.5 (15.9)	-3.2 (8.3)	NA	-5.1 (11.9)	NA
SPARCC MRI sacroiliac joint score	-3.4 (7.6)	-3.3 (8.7)	-4.1 (7.3)	-4.2 (7.5)	NA	NA	NA	NA
CRP, mg/L	-7.0 (17.0)	-9.4 (11.1)	-8.2 (15.5)	-10.2 (15.1)	-12.7 (31.7)	-10.9 (33.1)	-11.1 (19.6)	-11.4 (20.5)

*SF-36 PCS data are reported as t-scores, based on 2009 US general population norms.

ASAS, Assessment of SpondyloArthritis international Society; ASDAS, Ankylosing Spondylitis Disease Activity Score; BASDAI, Bath Ankylosing Spondylitis Disease Activity Index; BASFI, Bath Ankylosing Spondylitis Functional Index; bDMARD, biological disease-modifying antirheumatic drug; CRP, C-reactive protein; ITT, intent-to-treat; MBOCF, modified baseline observation carried forward; MRI, magnetic resonance imaging; NA, not applicable; NRI, non-responder imputation; SF-36 PCS, Medical Outcomes Study 36-item Short-Form Health Survey Physical Component Score; IXE Q2W, ixekizumab 80 mg every 2 weeks; IXE Q4W, ixekizumab 80 mg every 4 weeks; SD, standard deviation; SPARCC, Spondyloarthritis Research Consortium of Canada; TNFi, tumour necrosis factor inhibitor.



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Ann Rheum Dis 2020;**79**:e75. doi:10.1136/annrheumdis-2019-216118corr1

